

Professional Services Fee Schedule

HCPCS

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
A0021	Outside state ambulance serv	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0080	Noninterest escort in non er	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0090	Interest escort in non er	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0100	Nonemergency transport taxi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0110	Nonemergency transport bus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0120	Noner transport mini-bus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0130	Noner transport wheelch van	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0140	Nonemergency transport air	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0160	Noner transport case worker	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0170	Transport parking fees/tolls	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0180	Noner transport lodgng recip	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0190	Noner transport meals recip	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0200	Noner transport lodgng escrt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0210	Noner transport meals escort	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0225	Neonatal emergency transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0380	Basic life support mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0382	Basic support routine suppl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0384	Bls defibrillation supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0390	Advanced life support mileag	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0392	Als defibrillation supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0394	Als IV drug therapy supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0396	Als esophageal intub suppl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0398	Als routine dispoible suppl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0420	Ambulance waiting 1/2 hr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0422	Ambulance 02 life sustaining	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0424	Extra ambulance attendant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0425	Ground mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0426	Als 1	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0427	ALS1-emergency	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0428	bls	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0429	BLS-emergency	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0430	Fixed wing air transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0431	Rotary wing air transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0432	PI volunteer ambulance co	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A0433	als 2	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0434	Specialty care transport	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0435	Fixed wing air mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A0436	Rotary wing air mileage	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
A0888	Noncovered ambulance mileage	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A0999	Unlisted ambulance service	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4206	1 CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4207	2 CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4208	3 CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4209	5+ CC sterile syringe&needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4210	Nonneedle injection device	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4211	Supp for self-adm injections	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4212	Non coring needle or stylet	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4213	20+ CC syringe only	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4214	30 CC sterile water/saline	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4215	Sterile needle	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4220	Infusion pump refill kit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4221	Maint drug infus cath per wk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4222	Drug infusion pump supplies	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4230	Infus insulin pump non needl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4231	Infusion insulin pump needle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4232	Syringe w/needle insulin 3cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4244	Alcohol or peroxide per pint	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4245	Alcohol wipes per box	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4246	Betadine/phisohex solution	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4247	Betadine/iodine swabs/wipes	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4250	Urine reagent strips/tablets	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4253	Blood glucose/reagent strips	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4254	Battery for glucose monitor	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4255	Glucose monitor platforms	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4256	Calibrator solution/chips	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4257	Replace Lensshield Cartridge	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4258	Lancet device each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4259	Lancets per box	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4260	Levonorgestrel implant	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4261	Cervical cap contraceptive	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4262	Temporary tear duct plug	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4263	Permanent tear duct plug	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4265	Paraffin	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4266	Diaphragm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4267	Male condom	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4268	Female condom	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

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A4269	Spermicide	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4270	Disposable endoscope sheath	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4280	Brst prsths adhsv attchmnt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4281	Replacement breastpump tube	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4282	Replacement breastpump adpt	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4283	Replacement breastpump cap	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4284	Replcmnt breast pump shield	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4285	Replcmnt breast pump bottle	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4286	Replcmnt breastpump lok ring	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4290	Sacral nerve stim test lead	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4300	Cath impl vasc access portal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4301	Implantable access syst perc	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4305	Drug delivery system >=50 ML	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4306	Drug delivery system <=5 ML	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4310	Insert tray w/o bag/cath	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4311	Catheter w/o bag 2-way latex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4312	Cath w/o bag 2-way silicone	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4313	Catheter w/bag 3-way	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4314	Cath w/drainage 2-way latex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4315	Cath w/drainage 2-way silcne	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4316	Cath w/drainage 3-way	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4319	Sterile H2O irrigation solut	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4320	Irrigation tray	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4321	Cath therapeutic irrig agent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4322	Irrigation syringe	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4323	Saline irrigation solution	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4324	Male ext cath w/adh coating	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4325	Male ext cath w/adh strip	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4326	Male external catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4327	Fem urinary collect dev cup	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4328	Fem urinary collect pouch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4330	Stool collection pouch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4331	Extension drainage tubing	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4332	Lubricant for cath insertion	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4333	Urinary cath anchor device	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4334	Urinary cath leg strap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4335	Incontinence supply	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4338	Indwelling catheter latex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	

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A4340	Indwelling catheter special	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4344	Cath indw foley 2 way silicn	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4346	Cath indw foley 3 way	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4347	Male external catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4348	Male ext cath extended wear	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4351	Straight tip urine catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4352	Coude tip urinary catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4353	Intermittent urinary cath	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4354	Cath insertion tray w/bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4355	Bladder irrigation tubing	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4356	Ext ureth clmp or compr dvc	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4357	Bedside drainage bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4358	Urinary leg or abdomen bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4359	Urinary suspensory w/o leg b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4361	Ostomy face plate	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4362	Solid skin barrier	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4364	Adhesive, liquid or equal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4365	Adhesive remover wipes	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4367	Ostomy belt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4368	Ostomy filter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4369	Skin barrier liquid per oz	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4371	Skin barrier powder per oz	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4372	Skin barrier solid 4x4 equiv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4373	Skin barrier with flange	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4375	Drainable plastic pch w fcpl	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4376	Drainable rubber pch w fcplt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4377	Drainable plstic pch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4378	Drainable rubber pch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4379	Urinary plastic pouch w fcpl	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4380	Urinary rubber pouch w fcplt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4381	Urinary plastic pouch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4382	Urinary hvy plstc pch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4383	Urinary rubber pouch w/o fp	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4384	Ostomy faceplt/silicone ring	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4385	Ost skn barrier sld ext wear	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4387	Ost clsd pouch w att st barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4388	Drainable pch w ex wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4389	Drainable pch w st wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	

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A4390	Drainable pch ex wear convex	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4391	Urinary pouch w ex wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4392	Urinary pouch w st wear barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4393	Urine pch w ex wear bar conv	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4394	Ostomy pouch liq deodorant	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4395	Ostomy pouch solid deodorant	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4396	Peristomal hernia supprt blt	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4397	Irrigation supply sleeve	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4398	Ostomy irrigation bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4399	Ostomy irrig cone/cath w brs	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4400	Ostomy irrigation set	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4402	Lubricant per ounce	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4404	Ostomy ring each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4405	Nonpectin based ostomy paste	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4406	Pectin based ostomy paste	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4407	Ext wear ost skn barr <=4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4408	Ext wear ost skn barr >4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4409	Ost skn barr w flng <=4 sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4410	Ost skn barr w flng >4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4413	2 pc drainable ost pouch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4414	Ostomy sknbarr w flng <=4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4415	Ostomy skn barr w flng >4sq"	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4421	Ostomy supply misc	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4422	Ost pouch absorbent material	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4450	Non-waterproof tape	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4452	Waterproof tape	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4455	Adhesive remover per ounce	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4458	Reusable enema bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4462	Abdmnl drssng holder/binder	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4465	Non-elastic extremity binder	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4470	Gravlee jet washer	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4480	Vabra aspirator	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4481	Tracheostoma filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4483	Moisture exchanger	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4490	Above knee surgical stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4495	Thigh length surg stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4500	Below knee surgical stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4510	Full length surg stocking	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
A4521	Adult size diaper sm each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4522	Adult size diaper med each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4523	Adult size diaper lg each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4524	Adult size diaper xl each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4525	Adult size brief sm each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4526	Adult size brief med each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4527	Adult size brief lg each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4528	Adult size brief xl each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4529	Child size diaper sm/med ea	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4530	Child size diaper lg each	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4531	Child size brief sm/med each	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4532	Child size brief lg each	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4533	Youth size diaper each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4534	Youth size brief each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4535	Disp incont liner/shield ea	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4536	Prot underwr wshbl any sz ea	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4537	Under pad reusable any sz ea	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4538	Diaper sv ea reusable diaper	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4550	Surgical trays	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4554	Disposable underpads	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4556	Electrodes, pair	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4557	Lead wires, pair	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4558	Conductive paste or gel	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4561	Pessary rubber, any type	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4562	Pessary, non rubber,any type	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4565	Slings	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4570	Splint	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4575	Hyperbaric o2 chamber disps	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4580	Cast supplies (plaster)	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4590	Special casting material	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4595	TENS suppl 2 lead per month	Contracted	Contracted	0	0%	0%	0%	9	9	9	9	9	9		C		
A4606	Oxygen probe used w oximeter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4608	Transtacheal oxygen cath	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4609	Trach suction cath clsd sys	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4610	Trach sctn cath 72h clsdsys	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4611	Heavy duty battery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4612	Battery cables	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4613	Battery charger	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
A4614	Hand-held PEFR meter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4615	Cannula nasal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4616	Tubing (oxygen) per foot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4617	Mouth piece	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4618	Breathing circuits	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4619	Face tent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4620	Variable concentration mask	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4621	Tracheotomy mask or collar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4622	Tracheostomy or laryngectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4623	Tracheostomy inner cannula	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4624	Tracheal suction tube	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4625	Trach care kit for new trach	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4626	Tracheostomy cleaning brush	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4627	Spacer bag/reservoir	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4628	Oropharyngeal suction cath	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4629	Tracheostomy care kit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4630	Repl bat t.e.n.s. own by pt	Contracted	Contracted	0	0%	0%	0%	9	9	9	9	9	9		C		
A4631	Wheelchair battery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4632	Infus pump replcmnt battery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4633	Uvl replacement bulb	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4634	Replacement bulb th lightbox	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4635	Underarm crutch pad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4636	Handgrip for cane etc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4637	Repl tip cane/crutch/walker	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4639	Infrared ht sys replcmnt pad	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
A4640	Alternating pressure pad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4641	Diagnostic imaging agent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4642	Satumomab pendetide per dose	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4643	High dose contrast MRI	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4644	Contrast 100-199 MGs iodine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
A4645	Contrast 200-299 MGs iodine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
A4646	Contrast 300-399 MGs iodine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
A4647	Supp- paramagnetic contr mat	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4649	Surgical supplies	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4651	Calibrated microcap tube	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4652	Microcapillary tube sealant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4653	PD catheter anchor belt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4656	Needle any size	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
A4657	Syringe w/wo needle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4660	Sphyg/bp app w cuff and stet	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4663	Dialysis blood pressure cuff	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4670	Automatic bp monitor, dial	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A4680	Activated carbon filter, ea	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4690	Dialyzer, each	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4706	Bicarbonate conc sol per gal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4707	Bicarbonate conc pow per pac	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4708	Acetate conc sol per gallon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4709	Acid conc sol per gallon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4712	Sterile water inj per 10 ml	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4714	Treated water per gallon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4719	"Y set" tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4720	Dialysat sol fld vol > 249cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4721	Dialysat sol fld vol > 999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4722	Dialys sol fld vol > 1999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4723	Dialys sol fld vol > 2999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4724	Dialys sol fld vol > 3999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4725	Dialys sol fld vol > 4999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4726	Dialys sol fld vol > 5999cc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4730	Fistula cannulation set, ea	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4736	Topical anesthetic, per gram	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4737	Inj anesthetic per 10 ml	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4740	Shunt accessory	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4750	Art or venous blood tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4755	Comb art/venous blood tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4760	Dialysate sol test kit, each	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4765	Dialysate conc pow per pack	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4766	Dialysate conc sol add 10 ml	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4770	Blood collection tube/vacuum	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4771	Serum clotting time tube	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4772	Blood glucose test strips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4773	Occult blood test strips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4774	Ammonia test strips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4802	Protamine sulfate per 50 mg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4860	Disposable catheter tips	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4870	Plumb/elec wk hm hemo equip	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A4890	Repair/maint cont hemo equip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
A4911	Drain bag/bottle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4913	Misc dialysis supplies noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4918	Venous pressure clamp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4927	Non-sterile gloves	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4928	Surgical mask	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4929	Tourniquet for dialysis, ea	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A4930	Sterile, gloves per pair	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A4931	Reusable oral thermometer	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A4932	Reusable rectal thermometer	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A5051	Pouch clsd w barr attached	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5052	Clsd ostomy pouch w/o barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5053	Clsd ostomy pouch faceplate	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5054	Clsd ostomy pouch w/flange	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5055	Stoma cap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5061	Pouch drainable w barrier at	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5062	Drnble ostomy pouch w/o barr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5063	Drain ostomy pouch w/flange	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5071	Urinary pouch w/barrier	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5072	Urinary pouch w/o barrier	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5073	Urinary pouch on barr w/flng	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5081	Continent stoma plug	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5082	Continent stoma catheter	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5093	Ostomy accessory convex inse	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5102	Bedside drain btl w/wo tube	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5105	Urinary suspensory	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5112	Urinary leg bag	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5113	Latex leg strap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5114	Foam/fabric leg strap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5119	Skin barrier wipes box pr 50	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5121	Solid skin barrier 6x6	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5122	Solid skin barrier 8x8	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5126	Disk/foam pad +or- adhesive	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5131	Appliance cleaner	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A5200	Percutaneous catheter anchor	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A5500	Diab shoe for density insert	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A5501	Diabetic custom molded shoe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A5503	Diabetic shoe w/roller/rockr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A5504	Diabetic shoe with wedge	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
A5505	Diab shoe w/metatarsal bar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A5506	Diabetic shoe w/off set heel	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A5507	Modification diabetic shoe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A5508	Diabetic deluxe shoe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A5509	Direct heat form shoe insert	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A5510	Compression form shoe insert	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A5511	Custom fab molded shoe inser	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6000	Wound warming wound cover	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6010	Collagen based wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6011	Collagen gel/paste wound fil	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6021	Collagen dressing <=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6022	Collagen drsg>6<=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6023	Collagen dressing >48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6024	Collagen dsq wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6025	Silicone gel sheet, each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6154	Wound pouch each	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6196	Alginate dressing <=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6197	Alginate drsg >16 <=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6198	alginate dressing > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6199	Alginate drsg wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6200	Compos drsg <=16 no border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6201	Compos drsg >16<=48 no bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6202	Compos drsg >48 no border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6203	Composite drsg <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6204	Composite drsg >16<=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6205	Composite drsg > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6206	Contact layer <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6207	Contact layer >16<= 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6208	Contact layer > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6209	Foam drsg <=16 sq in w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6210	Foam drg >16<=48 sq in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6211	Foam drg > 48 sq in w/o brdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6212	Foam drg <=16 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6213	Foam drg >16<=48 sq in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6214	Foam drg > 48 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6215	Foam dressing wound filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6216	Non-sterile gauze<=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6217	Non-sterile gauze>16<=48 sq	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
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A6218	Non-sterile gauze > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6219	Gauze <= 16 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6220	Gauze >16 <=48 sq in w/bordr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6221	Gauze > 48 sq in w/border	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6222	Gauze <=16 in no w/sal w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6223	Gauze >16<=48 no w/sal w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6224	Gauze > 48 in no w/sal w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6228	Gauze <= 16 sq in water/sal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6229	Gauze >16<=48 sq in watr/sal	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6230	Gauze > 48 sq in water/salne	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6231	Hydrogel dsg<=16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6232	Hydrogel dsg>16<=48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6233	Hydrogel dressing >48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6234	Hydrocolld drg <=16 w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6235	Hydrocolld drg >16<=48 w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6236	Hydrocolld drg > 48 in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6237	Hydrocolld drg <=16 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6238	Hydrocolld drg >16<=48 w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6239	Hydrocolld drg > 48 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6240	Hydrocolld drg filler paste	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6241	Hydrocolloid drg filler dry	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6242	Hydrogel drg <=16 in w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6243	Hydrogel drg >16<=48 w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6244	Hydrogel drg >48 in w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6245	Hydrogel drg <= 16 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6246	Hydrogel drg >16<=48 in w/b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6247	Hydrogel drg > 48 sq in w/b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6248	Hydrogel drsg gel filler	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6250	Skin seal protect moisturizr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6251	Absorpt drg <=16 sq in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6252	Absorpt drg >16 <=48 w/o bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6253	Absorpt drg > 48 sq in w/o b	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6254	Absorpt drg <=16 sq in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6255	Absorpt drg >16<=48 in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6256	Absorpt drg > 48 sq in w/bdr	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6257	Transparent film <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6258	Transparent film >16<=48 in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A6259	Transparent film > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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A6260	Wound cleanser any type/size	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6261	Wound filler gel/paste /oz	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6262	Wound filler dry form / gram	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6266	Impreg gauze no h20/sal/yard	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6402	Sterile gauze <= 16 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6403	Sterile gauze>16 <= 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6404	Sterile gauze > 48 sq in	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6410	Sterile eye pad	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6411	Non-sterile eye pad	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6412	Occlusive eye patch	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6421	Pad bandage >=3 <5in w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6422	Conf bandage ns >=3<5"w/roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6424	Conf bandage ns >=5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6426	Conf bandage s >=3<5" w/roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6428	Conf bandage s >=5" w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6430	Lt compres bdg >=3<5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6432	Lt compres bdg >=5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6434	Mo compres bdg >=3<5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6436	Hi compres bdg >=3<5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6438	Self-adher bdg >=3<5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6440	Zinc paste bdg >=3<5"w /roll	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
A6501	Compres burngarment bodysuit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6502	Compres burngarment chinstrp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6503	Compres burngarment facehood	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6504	Cmpsrburngarment glove-wrist	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6505	Cmpsrburngarment glove-elbow	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6506	Cmpsrburngrmnt glove-axilla	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6507	Cmpsr burngarment foot-knee	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6508	Cmpsr burngarment foot-thigh	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6509	Compres burn garment jacket	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6510	Compres burn garment leotard	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6511	Compres burn garment panty	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A6512	Compres burn garment, noc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A7000	Disposable canister for pump	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A7001	Nondisposable pump canister	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A7002	Tubing used w suction pump	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A7003	Nebulizer administration set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A7004	Disposable nebulizer sml vol	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

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A7005	Nondisposable nebulizer set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7006	Filtered nebulizer admin set	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7007	Lg vol nebulizer disposable	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7008	Disposable nebulizer prefill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7009	Nebulizer reservoir bottle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7010	Disposable corrugated tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7011	Nondispos corrugated tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7012	Nebulizer water collec devic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7013	Disposable compressor filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7014	Compressor nondispos filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7015	Aerosol mask used w nebulize	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7016	Nebulizer dome & mouthpiece	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7017	Nebulizer not used w oxygen	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7018	Water distilled w/nebulizer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7019	Saline solution dispenser	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7020	Sterile H2O or NSS w lgv neb	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7025	Replace chest compress vest	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7026	Replace chst cmprrs sys hose	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7030	CPAP full face mask	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7031	Replacement facemask interfa	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7032	Replacement nasal cushion	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7033	Replacement nasal pillows	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7034	Nasal application device	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7035	Pos airway press headgear	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7036	Pos airway press chinstrap	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7037	Pos airway pressure tubing	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7038	Pos airway pressure filter	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7039	Filter, non disposable w pap	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7042	Implanted pleural catheter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7043	Vacuum drainagebottle/tubing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7044	PAP oral interface	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A7501	Tracheostoma valve w diaphra	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7502	Replacement diaphragm/fplate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7503	HMES filter holder or cap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7504	Tracheostoma HMES filter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7505	HMES or trach valve housing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7506	HMES/trachvalve adhesivedisk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7507	Integrated filter & holder	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
A7508	Housing & Integrated Adhesiv	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A7509	Heat & moisture exchange sys	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9150	Misc/exper non-prescript dru	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9270	Non-covered item or service	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A9300	Exercise equipment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
A9500	Technetium TC 99m sestamibi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9502	Technetium TC99M tetrofosmin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
A9503	Technetium TC 99m medronate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
A9504	Technetium tc 99m apcitide	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9505	Thallous chloride TL 201/mci	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
A9507	Indium/111 capromab pendetid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9508	Iobenguane sulfate I-131	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
A9510	Technetium TC99m Disofenin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
A9511	Technetium TC 99m depreotide	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9512	Technetiumtc99mpertechetate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9513	Technetium tc-99m mebrofenin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9514	Technetiumtc99mpyrophosphate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9515	Technetium tc-99m pentetate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9516	I-123 sodium iodide capsule	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9517	I-131 sodium iodide capsule	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9518	I-131 sodium iodide solution	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9519	Technetiumtc-99mmacroag albu	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9520	Technetiumtc-99m sulfur clld	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9521	Technetiumtc-99m exametazine	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9522	Indium111ibritumomabtiuxetan	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9523	Yttrium90ibritumomabtiuxetan	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9524	Iodinated I-131 serumalbumin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9600	Strontium-89 chloride	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9605	Samarium sm153 leixidronamm	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
A9699	Noc therapeutic radiopharm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9700	Echocardiography Contrast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
A9900	Supply/accessory/service	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
A9901	Delivery/set up/dispensing	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
B4034	Enter feed supkit syr by day	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4035	Enteral feed supp pump per d	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4036	Enteral feed sup kit grav by	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4081	Enteral ng tubing w/ stylet	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4082	Enteral ng tubing w/o stylet	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
B4083	Enteral stomach tube levine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4086	Gastrostomy/jejunostomy tube	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
B4100	Food thickener oral	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
B4150	Enteral formulae category i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4151	Enteral formulae cat1natural	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4152	Enteral formulae category ii	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4153	Enteral formulae categoryIII	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4154	Enteral formulae category IV	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4155	Enteral formulae category v	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4156	Enteral formulae category vi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4164	Parenteral 50% dextrose solu	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4168	Parenteral sol amino acid 3.	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4172	Parenteral sol amino acid 5.	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4176	Parenteral sol amino acid 7-	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4178	Parenteral sol amino acid >	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4180	Parenteral sol carb > 50%	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4184	Parenteral sol lipids 10%	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4186	Parenteral sol lipids 20%	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4189	Parenteral sol amino acid &	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4193	Parenteral sol 52-73 gm prot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4197	Parenteral sol 74-100 gm pro	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4199	Parenteral sol > 100gm prote	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4216	Parenteral nutrition additiv	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4220	Parenteral supply kit premix	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4222	Parenteral supply kit homemi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B4224	Parenteral administration ki	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B5000	Parenteral sol renal-amirosoy	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B5100	Parenteral sol hepatic-fream	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B5200	Parenteral sol stres-brnch c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B9000	Enter infusion pump w/o alrm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B9002	Enteral infusion pump w/ ala	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B9004	Parenteral infus pump portab	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B9006	Parenteral infus pump statio	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B9998	Enteral supp not otherwise c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
B9999	Parenteral supp not othrws c	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
C1010	Blood, L/R, CMV-NEG	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1011	Platelets, HLA-m, L/R, unit	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1015	Plt, pher,L/R,CMV, irrad	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
C1016	BLOOD,L/R,FROZ/DEGLY/Washed	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1017	Plt, APH/PHER,L/R,CMV-NEG	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1018	Blood, L/R, IRRADIATED	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1020	RBC, frz/deg/wsh, L/R, irradi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1021	RBC, L/R, CMV neg, irradi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1022	Plasma, frz within 24 hour	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1079	CO 57/58 per 0.5 uCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1088	LASER OPTIC TR Sys	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1091	IN111 oxyquinoline,per0.5mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1092	IN 111 pentetate per 0.5 mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1122	Tc 99M ARCITUMOMAB PER VIAL	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1146	Vett Tube	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1166	CYTARABINE LIPOSOMAL, 10 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1167	EPIRUBICIN HCL, 2 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1170	ABBI DISP BIOPSY Device	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1174	BARD BRACHYTX Needle	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1178	BUSULFAN IV, 6 Mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1200	TC 99M Sodium Glucoheptonat	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1201	TC 99M SUCCIMER, PER Vial	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1300	HYPERBARIC Oxygen	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1305	Apligraf	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1716	Brachytx seed, Gold 198	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1718	Brachytx seed, Iodine 125	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1719	Brachytx seed,Non-HDR Ir-192	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1720	Brachytx seed, Palladium 103	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1765	Adhesion barrier	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1774	Darbepoetin alfa, non-esrd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1775	FDG, per dose (4-40 mCi/ml)	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C1783	Ocular imp, aqueous drain de	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1814	Retinal tamp, silicone oil	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1884	Embolization protect syst	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1888	Endovas non-cardiac abl cath	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C1900	Lead, coronary venous	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C2614	Probe, perc lumb disc	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C2616	Brachytx seed, Yttrium-90	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C2618	Probe, cryoablation	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C2632	Brachytx sol, I-125, per mCi	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C8900	MRA w/cont, abd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	

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Professional Services Fee Schedule

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C8901	MRA w/o cont, abd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8902	MRA w/o fol w/cont, abd	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8903	MRI w/cont, breast, uni	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8904	MRI w/o cont, breast, uni	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8905	MRI w/o fol w/cont, brst, un	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8906	MRI w/cont, breast, bi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8907	MRI w/o cont, breast, bi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8908	MRI w/o fol w/cont, breast,	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8909	MRA w/cont, chest	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8910	MRA w/o cont, chest	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8911	MRA w/o fol w/cont, chest	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8912	MRA w/cont, lwr ext	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8913	MRA w/o cont, lwr ext	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C8914	MRA w/o fol w/cont, lwr ext	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9000	Na chromateCr51, per 0.25mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9003	Palivizumab, per 50 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9007	Baclofen Intrathecal kit-1am	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9008	Baclofen Refill Kit-500mcg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9009	Baclofen Refill Kit-2000mcg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9010	Baclofen Refill Kit--4000mcg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9013	Co 57 cobaltous chloride	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9102	51 Na Chromate, 50mCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9103	Na Iothalamate I-125, 10 uCi	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9105	Hep B imm glob, per 1 ml	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9109	Tirofiban hcl, 6.25 mg	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9111	Inj, bivalirudin, 250mg vial	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9112	Perflutren lipid micro, 2ml	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9113	Inj pantoprazole sodium, via	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9116	Ertapenem sodium, per 1 gm	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9117	Y-90 ibritumomab tiuxetan	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C9118	IN-111 ibritumomab tiuxetan	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C9119	Injection, pegfilgrastim	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C9120	Injection, fulvestrant	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
C9121	Injection, argatroban	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9200	Orcel, per 36 cm2	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9201	Dermagraft, per 37.5 sq cm	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9202	Human albumin micro	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9203	Perflexane lipid micro	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
C9204	Ziprasidone mesylate	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9503	Fresh frozen plasma, ea unit	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9701	Stretta System	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9703	Bard Endoscopic Suturing Sys	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	0	0	0	0	0		O	
C9711	H.E.L.P. Apheresis System	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
D0120	Periodic oral evaluation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0140	Limit oral eval problm focus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0150	Comprehensve oral evaluation	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0160	Extensv oral eval prob focus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0170	Re-eval,est pt,problem focus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0180	Comp periodontal evaluation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
D0210	Intraor complete film series	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0220	Intraoral periapical first f	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0230	Intraoral periapical ea add	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0240	Intraoral occlusal film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0250	Extraoral first film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0260	Extraoral ea additional film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0270	Dental bitewing single film	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0272	Dental bitewings two films	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0274	Dental bitewings four films	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0277	Vert bitewings-sev to eight	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0290	Dental film skull/facial bon	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0310	Dental saliography	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0320	Dental tmj arthrogram incl i	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0321	Dental other tmj films	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0322	Dental tomographic survey	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0330	Dental panoramic film	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0340	Dental cephalometric film	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0350	Oral/facial images	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0415	Bacteriologic study	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0425	Caries susceptibility test	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0460	Pulp vitality test	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D0470	Diagnostic casts	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0472	Gross exam, prep & report	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0473	Micro exam, prep & report	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0474	Micro w exam of surg margins	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0480	Cytopath smear prep & report	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D0502	Other oral pathology procedu	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
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D0999	Unspecified diagnostic proce	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D1110	Dental prophylaxis adult	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1120	Dental prophylaxis child	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1201	Topical fluor w prophy child	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1203	Topical fluor w/o prophy chi	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1204	Topical fluor w/o prophy adu	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1205	Topical fluoride w/ prophy a	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1310	Nutri counsel-control caries	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1320	Tobacco counseling	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
D1330	Oral hygiene instruction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1351	Dental sealant per tooth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D1510	Space maintainer fxd unilat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D1515	Fixed bilat space maintainer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D1520	Remove unilat space maintain	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D1525	Remove bilat space maintain	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D1550	Recement space maintainer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
D2140	Amalgam one surface permanen	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2150	Amalgam two surfaces permane	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2160	Amalgam three surfaces perma	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2161	Amalgam 4 or > surfaces perm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2330	Resin one surface-anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2331	Resin two surfaces-anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2332	Resin three surfaces-anterio	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2335	Resin 4/> surf or w incis an	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2390	Ant resin-based cmpst crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2391	Post 1 srfc resinbased cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2392	Post 2 srfc resinbased cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2393	Post 3 srfc resinbased cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2394	Post >=4srfc resinbase cmpst	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2410	Dental gold foil one surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2420	Dental gold foil two surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2430	Dental gold foil three surfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2510	Dental inlay metallic 1 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2520	Dental inlay metallic 2 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2530	Dental inlay metl 3/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2542	Dental onlay metallic 2 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2543	Dental onlay metallic 3 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D2544	Dental onlay metl 4/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
D2610	Inlay porcelain/ceramic 1 su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2620	Inlay porcelain/ceramic 2 su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2630	Dental onlay porc 3/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2642	Dental onlay porcelin 2 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2643	Dental onlay porcelin 3 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2644	Dental onlay porc 4/more sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2650	Inlay composite/resin one su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2651	Inlay composite/resin two su	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2652	Dental inlay resin 3/mre sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2662	Dental onlay resin 2 surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2663	Dental onlay resin 3 surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2664	Dental onlay resin 4/mre sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2710	Crown resin laboratory	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2720	Crown resin w/ high noble me	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2721	Crown resin w/ base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2722	Crown resin w/ noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2740	Crown porcelain/ceramic subs	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2750	Crown porcelain w/ h noble m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2751	Crown porcelain fused base m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2752	Crown porcelain w/ noble met	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2780	Crown 3/4 cast hi noble met	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2781	Crown 3/4 cast base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2782	Crown 3/4 cast noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2783	Crown 3/4 porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2790	Crown full cast high noble m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2791	Crown full cast base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2792	Crown full cast noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2799	Provisional crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2910	Dental recement inlay	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2920	Dental recement crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2930	Prefab stnlss steel crwn pri	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2931	Prefab stnlss steel crown pe	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2932	Prefabricated resin crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2933	Prefab stainless steel crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2940	Dental sedative filling	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2950	Core build-up incl any pins	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2951	Tooth pin retention	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2952	Post and core cast + crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
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D2953	Each addtnl cast post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2954	Prefab post/core + crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2955	Post removal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2957	Each addtnl prefab post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2960	Laminate labial veneer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2961	Lab labial veneer resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2962	Lab labial veneer porcelain	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2970	Temporary- fractured tooth	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D2980	Crown repair	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D2999	Dental unspec restorative pr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D3110	Pulp cap direct	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3120	Pulp cap indirect	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3220	Therapeutic pulpotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3221	Gross pulpal debridement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3230	Pulpal therapy anterior prim	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3240	Pulpal therapy posterior pri	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3310	Anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3320	Root canal therapy 2 canals	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3330	Root canal therapy 3 canals	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3331	Non-surg tx root canal obs	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3332	Incomplete endodontic tx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3333	Internal root repair	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3346	Retreat root canal anterior	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3347	Retreat root canal bicuspid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3348	Retreat root canal molar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3351	Apexification/recalc initial	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3352	Apexification/recalc interim	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3353	Apexification/recalc final	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3410	Apicoect/perirad surg anter	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3421	Root surgery bicuspid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3425	Root surgery molar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3426	Root surgery ea add root	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3430	Retrograde filling	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3450	Root amputation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3460	Endodontic endosseous implan	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D3470	Intentional replantation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3910	Isolation- tooth w rubb dam	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3920	Tooth splitting	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
D3950	Canal prep/fitting of dowel	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D3999	Endodontic procedure	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4210	Gingivectomy/plasty per quad	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4211	Gingivectomy/plasty per toot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4240	Gingival flap proc w/ planin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4241	Gngvl flap w rootplan 1-3 th	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
D4245	Apically positioned flap	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4249	Crown lengthen hard tissue	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4260	Osseous surgery per quadrant	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4261	Osseous surgl-3teethperquad	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
D4263	Bone replce graft first site	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4264	Bone replce graft each add	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4265	Bio mtrls to aid soft/os reg	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4266	Guided tiss regen resorb	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4267	Guided tiss regen nonresorb	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4268	Surgical revision procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4270	Pedicle soft tissue graft pr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4271	Free soft tissue graft proc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4273	Subepithelial tissue graft	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4274	Distal/proximal wedge proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4275	Soft tissue allograft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4276	Con tissue w dble ped graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4320	Provision splnt intracoronal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4321	Provisional splint extracoro	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4341	Periodontal scaling & root	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4342	Periodontal scaling 1-3teeth	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
D4355	Full mouth debridement	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4381	Localized chemo delivery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D4910	Periodontal maint procedures	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4920	Unscheduled dressing change	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D4999	Unspecified periodontal proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5110	Dentures complete maxillary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5120	Dentures complete mandible	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5130	Dentures immediat maxillary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5140	Dentures immediat mandible	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5211	Dentures maxill part resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5212	Dentures mand part resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5213	Dentures maxill part metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING		PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)		
D5214	Dentures mandibl part metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5281	Removable partial denture	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5410	Dentures adjust cmplt maxil	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5411	Dentures adjust cmplt mand	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5421	Dentures adjust part maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5422	Dentures adjust part mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5510	Dentur repr broken compl bas	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5520	Replace denture teeth complt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5610	Dentures repair resin base	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5620	Rep part denture cast frame	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5630	Rep partial denture clasp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5640	Replace part denture teeth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5650	Add tooth to partial denture	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5660	Add clasp to partial denture	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5670	Replc tth&acrlc on mtl frmwk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5671	Replc tth&acrlc mandibular	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5710	Dentures rebase cmplt maxil	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5711	Dentures rebase cmplt mand	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5720	Dentures rebase part maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5721	Dentures rebase part mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5730	Denture reln cmplt maxil chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5731	Denture reln cmplt mand chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5740	Denture reln part maxil chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5741	Denture reln part mand chr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5750	Denture reln cmplt max lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5751	Denture reln cmplt mand lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5760	Denture reln part maxil lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5761	Denture reln part mand lab	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5810	Denture interm cmplt maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5811	Denture interm cmplt mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5820	Denture interm part maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5821	Denture interm part mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5850	Denture tiss conditn maxill	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5851	Denture tiss conditn mandbl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5860	Overdenture complete	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5861	Overdenture partial	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5862	Precision attachment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D5867	Replacement of precision att	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
D5875	Prosthesis modification	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5899	Removable prosthodontic proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5911	Facial moulage sectional	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D5912	Facial moulage complete	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D5913	Nasal prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5914	Auricular prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5915	Orbital prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5916	Ocular prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5919	Facial prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5922	Nasal septal prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5923	Ocular prosthesis interim	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5924	Cranial prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5925	Facial augmentation implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5926	Replacement nasal prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5927	Auricular replacement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5928	Orbital replacement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5929	Facial replacement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5931	Surgical obturator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5932	Postsurgical obturator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5933	Refitting of obturator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5934	Mandibular flange prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5935	Mandibular denture prosth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5936	Temp obturator prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5937	Trismus appliance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5951	Feeding aid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D5952	Pediatric speech aid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5953	Adult speech aid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5954	Superimposed prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5955	Palatal lift prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5958	Intraoral con def inter plt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5959	Intraoral con def mod palat	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5960	Modify speech aid prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5982	Surgical stent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5983	Radiation applicator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D5984	Radiation shield	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D5985	Radiation cone locator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D5986	Fluoride applicator	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5987	Commissure splint	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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D5988	Surgical splint	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D5999	Maxillofacial prosthesis	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6010	Odontics endosteal implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6020	Odontics abutment placement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6040	Odontics eposteal implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6050	Odontics transosteal implnt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6053	Implnt/abtmnt spprt remv dnt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6054	Implnt/abtmnt spprt remvprtl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6055	Implant connecting bar	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6056	Prefabricated abutment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6057	Custom abutment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6058	Abutment supported crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6059	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6060	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6061	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6062	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6063	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6064	Abutment supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6065	Implant supported crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6066	Implant supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6067	Implant supported mtl crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6068	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6069	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6070	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6071	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6072	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6073	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6074	Abutment supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6075	Implant supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6076	Implant supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6077	Implant supported retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6078	Implnt/abut suprted fixd dent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6079	Implnt/abut suprted fixd dent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6080	Implant maintenance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6090	Repair implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6095	Odontics repr abutment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6100	Removal of implant	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6199	Implant procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
D6210	Prosthodont high noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6211	Bridge base metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6212	Bridge noble metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6240	Bridge porcelain high noble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6241	Bridge porcelain base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6242	Bridge porcelain nobel metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6245	Bridge porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6250	Bridge resin w/high noble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6251	Bridge resin base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6252	Bridge resin w/noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6253	Provisional pontic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6545	Dental retainr cast metl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6548	Porcelain/ceramic retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6600	Porcelain/ceramic inlay 2srf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6601	Porc/ceram inlay >= 3 surfac	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6602	Cst hgh nble mtl inlay 2 srf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6603	Cst hgh nble mtl inlay >=3sr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6604	Cst bse mtl inlay 2 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6605	Cst bse mtl inlay >= 3 surfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6606	Cast noble metal inlay 2 sur	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6607	Cst noble mtl inlay >=3 surf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6608	Onlay porc/crmc 2 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6609	Onlay porc/crmc >=3 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6610	Onlay cst hgh nbl mtl 2 srfc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6611	Onlay cst hgh nbl mtl >=3srf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6612	Onlay cst base mtl 2 surface	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6613	Onlay cst base mtl >=3 surfa	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6614	Onlay cst nbl mtl 2 surfaces	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6615	Onlay cst nbl mtl >=3 surfac	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6720	Retain crown resin w hi nble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6721	Crown resin w/base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6722	Crown resin w/noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6740	Crown porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6750	Crown porcelain high noble	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6751	Crown porcelain base metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6752	Crown porcelain noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6780	Crown 3/4 high noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
D6781	Crown 3/4 cast based metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
D6782	Crown 3/4 cast noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6783	Crown 3/4 porcelain/ceramic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6790	Crown full high noble metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6791	Crown full base metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6792	Crown full noble metal cast	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6793	Provisional retainer crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6920	Dental connector bar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D6930	Dental recement bridge	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6940	Stress breaker	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6950	Precision attachment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6970	Post & core plus retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6971	Cast post bridge retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6972	Prefab post & core plus reta	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6973	Core build up for retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6975	Coping metal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6976	Each addtnl cast post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6977	Each addtl prefab post	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6980	Bridge repair	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D6985	Pediatric partial denture fx	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
D6999	Fixed prosthodontic proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7111	Coronal remnants deciduous t	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7140	Extraction erupted tooth/exr	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7210	Rem imp tooth w mucoper flp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7220	Impact tooth remov soft tiss	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7230	Impact tooth remov part bony	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7240	Impact tooth remov comp bony	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7241	Impact tooth rem bony w/comp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7250	Tooth root removal	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7260	Oral antral fistula closure	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7261	Primary closure sinus perf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7270	Tooth reimplantation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7272	Tooth transplantation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7280	Exposure impact tooth orthod	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7281	Exposure tooth aid eruption	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7282	Mobilize erupted/malpos toot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7285	Biopsy of oral tissue hard	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7286	Biopsy of oral tissue soft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7287	Cytology sample collection	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING		PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)		
D7290	Repositioning of teeth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7291	Transseptal fiberotomy	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N
D7310	Alveoplasty w/ extraction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7320	Alveoplasty w/o extraction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7340	Vestibuloplasty ridge extens	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7350	Vestibuloplasty exten graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7410	Rad exc lesion up to 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7411	Excision benign lesion>1.25c	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7412	Excision benign lesion compl	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7413	Excision malig lesion<=1.25c	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7414	Excision malig lesion>1.25cm	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7415	Excision malig les complicat	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7440	Malig tumor exc to 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7441	Malig tumor > 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7450	Rem odontogen cyst to 1.25cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7451	Rem odontogen cyst > 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7460	Rem nonodontocyst to 1.25cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7461	Rem nonodontocyst > 1.25 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7465	Lesion destruction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7471	Rem exostosis any site	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7472	Removal of torus palatinus	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7473	Remove torus mandibularis	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7485	Surg reduct osseoustuberosit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
D7490	Mandible resection	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7510	I&d abscc intraoral soft tiss	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7520	I&d abscess extraoral	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7530	Removal fb skin/areolar tiss	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7540	Removal of fb reaction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7550	Removal of sloughed off bone	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7560	Maxillary sinusotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7610	Maxilla open reduct simple	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7620	Clsd reduct simpl maxilla fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7630	Open red simpl mandible fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7640	Clsd red simpl mandible fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7650	Open red simp malar/zygom fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7660	Clsd red simp malar/zygom fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7670	Closd rductn splint alveolus	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N
D7671	Alveolus open reduction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
D7680	Reduct simple facial bone fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7710	Maxilla open reduct compound	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7720	Clsd reduct compd maxilla fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7730	Open reduct compd mandble fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7740	Clsd reduct compd mandble fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7750	Open red comp malar/zygma fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7760	Clsd red comp malar/zygma fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7770	Open reduc compd alveolus fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7771	Alveolus clsd reduc stblz te	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7780	Reduct compnd facial bone fx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7810	Tmj open reduct-dislocation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7820	Closed tmp manipulation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7830	Tmj manipulation under anest	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7840	Removal of tmj condyle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7850	Tmj meniscectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7852	Tmj repair of joint disc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7854	Tmj excisn of joint membrane	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7856	Tmj cutting of a muscle	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7858	Tmj reconstruction	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7860	Tmj cutting into joint	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7865	Tmj reshaping components	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7870	Tmj aspiration joint fluid	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7871	Lysis + lavage w catheters	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7872	Tmj diagnostic arthroscopy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7873	Tmj arthroscopy lysis adhesn	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7874	Tmj arthroscopy disc reposit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7875	Tmj arthroscopy synovectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7876	Tmj arthroscopy disectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7877	Tmj arthroscopy debridement	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7880	Occlusal orthotic appliance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7899	Tmj unspecified therapy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7910	Dent sutur recent wnd to 5cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7911	Dental suture wound to 5 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7912	Suture complicate wnd > 5 cm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7920	Dental skin graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7940	Reshaping bone orthognathic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D7941	Bone cutting ramus closed	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7943	Cutting ramus open w/graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
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D7944	Bone cutting segmented	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7945	Bone cutting body mandible	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7946	Reconstruction maxilla total	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7947	Reconstruct maxilla segment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7948	Reconstruct midface no graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7949	Reconstruct midface w/graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7950	Mandible graft	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7955	Repair maxillofacial defects	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7960	Frenulectomy/frenulotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7970	Excision hyperplastic tissue	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7971	Excision pericoronal gingiva	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7972	Surg redct fibrous tuberosit	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
D7980	Sialolithotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7981	Excision of salivary gland	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7982	Sialodochoplasty	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7983	Closure of salivary fistula	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7990	Emergency tracheotomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7991	Dental coronoidectomy	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7995	Synthetic graft facial bones	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7996	Implant mandible for augment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7997	Appliance removal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D7999	Oral surgery procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8010	Limited dental tx primary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8020	Limited dental tx transition	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8030	Limited dental tx adolescent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8040	Limited dental tx adult	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8050	Intercep dental tx primary	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8060	Intercep dental tx transitn	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8070	Compre dental tx transition	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8080	Compre dental tx adolescent	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8090	Compre dental tx adult	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8210	Orthodontic rem appliance tx	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8220	Fixed appliance therapy habt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8660	Preorthodontic tx visit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8670	Periodic orthodontc tx visit	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8680	Orthodontic retention	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8690	Orthodontic treatment	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8691	Repair ortho appliance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
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D8692	Replacement retainer	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D8999	Orthodontic procedure	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9110	Tx dental pain minor proc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9210	Dent anesthesia w/o surgery	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9211	Regional block anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9212	Trigeminal block anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9215	Local anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9220	General anesthesia	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9221	General anesthesia ea ad 15m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9230	Analgesia	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9241	Intravenous sedation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9242	IV sedation ea ad 30 m	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9248	Sedation (non-iv)	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9310	Dental consultation	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9410	Dental house call	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9420	Hospital call	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9430	Office visit during hours	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9440	Office visit after hours	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9450	Case presentation tx plan	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9610	Dent therapeutic drug inject	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9630	Other drugs/medicaments	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9910	Dent appl desensitizing med	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9911	Appl desensitizing resin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9920	Behavior management	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9930	Treatment of complications	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9940	Dental occlusal guard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9941	Fabrication athletic guard	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9950	Occlusion analysis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9951	Limited occlusal adjustment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9952	Complete occlusal adjustment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
D9970	Enamel microabrasion	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9971	Odontoplasty 1-2 teeth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9972	Extrnl bleaching per arch	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9973	Extrnl bleaching per tooth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9974	Intrnl bleaching per tooth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
D9999	Adjunctive procedure	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
E0100	Cane adjust/fixed with tip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0105	Cane adjust/fixed quad/3 pro	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
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E0110	Crutch forearm pair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0111	Crutch forearm each	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0112	Crutch underarm pair wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0113	Crutch underarm each wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0114	Crutch underarm pair no wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0116	Crutch underarm each no wood	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0117	Underarm springassist crutch	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0130	Walker rigid adjust/fixed ht	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0135	Walker folding adjust/fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0141	Rigid walker wheeled wo seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0142	Walker rigid wheeled with se	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0143	Walker folding wheeled w/o s	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0144	Enclosed walker w rear seat	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0145	Walker whled seat/crutch att	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0146	Folding walker wheels w seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0147	Walker variable wheel resist	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0148	Heavyduty walker no wheels	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0149	Heavy duty wheeled walker	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0153	Forearm crutch platform atta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0154	Walker platform attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0155	Walker wheel attachment,pair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0156	Walker seat attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0157	Walker crutch attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0158	Walker leg extenders set of4	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0159	Brake for wheeled walker	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0160	Sitz type bath or equipment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0161	Sitz bath/equipment w/faucet	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0162	Sitz bath chair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0163	Commode chair stationry fxd	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0164	Commode chair mobile fixed a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0165	Commode chair stationry det	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0166	Commode chair mobile detach	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0167	Commode chair pail or pan	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0168	Heavyduty/wide commode chair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0169	Seatlift incorp commodechair	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0175	Commode chair foot rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0176	Air pressre pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0177	Water press pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
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E0178	Gel pressre pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0179	Dry pressre pad/cushion nonp	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0180	Press pad alternating w pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0181	Press pad alternating w/ pum	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0182	Pressure pad alternating pum	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0184	Dry pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0185	Gel pressure mattress pad	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0186	Air pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0187	Water pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0188	Synthetic sheepskin pad	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0189	Lambswool sheepskin pad	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0191	Protector heel or elbow	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0192	Pad wheelchr low press/posit	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0193	Powered air flotation bed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0194	Air fluidized bed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0196	Gel pressure mattress	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0197	Air pressure pad for mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0198	Water pressure pad for mattre	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0199	Dry pressure pad for mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0200	Heat lamp without stand	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0202	Phototherapy light w/ photom	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0203	Therapeutic lightbox tabletp	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0205	Heat lamp with stand	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0210	Electric heat pad standard	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0215	Electric heat pad moist	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0217	Water circ heat pad w pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0218	Water circ cold pad w pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0220	Hot water bottle	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0221	Infrared heating pad system	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0225	Hydrocollator unit	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0230	Ice cap or collar	Bundled	Bundled	0	0%	0%	0%	0	0	0	0	0	0		B	
E0231	Wound warming device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0232	Warming card for NWT	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0235	Paraffin bath unit portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0236	Pump for water circulating p	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0238	Heat pad non-electric moist	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0239	Hydrocollator unit portable	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0241	Bath tub wall rail	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

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Professional Services Fee Schedule

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E0242	Bath tub rail floor	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0243	Toilet rail	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0244	Toilet seat raised	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0245	Tub stool or bench	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0246	Transfer tub rail attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0249	Pad water circulating heat u	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
E0250	Hosp bed fixed ht w/ mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0251	Hosp bed fixd ht w/o mattres	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0255	Hospital bed var ht w/ mattr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0256	Hospital bed var ht w/o matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0260	Hosp bed semi-electr w/ matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0261	Hosp bed semi-electr w/o mat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0265	Hosp bed total electr w/ mat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0266	Hosp bed total elec w/o matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0270	Hospital bed institutional t	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0271	Mattress innerspring	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0272	Mattress foam rubber	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0273	Bed board	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0274	Over-bed table	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0275	Bed pan standard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0276	Bed pan fracture	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0277	Powered pres-redu air mattrs	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0280	Bed cradle	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0290	Hosp bed fx ht w/o rails w/m	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0291	Hosp bed fx ht w/o rail w/o	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0292	Hosp bed var ht w/o rail w/o	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0293	Hosp bed var ht w/o rail w/	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0294	Hosp bed semi-elect w/ mattr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0295	Hosp bed semi-elect w/o matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0296	Hosp bed total elect w/ matt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0297	Hosp bed total elect w/o mat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0305	Rails bed side half length	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0310	Rails bed side full length	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0315	Bed accessory brd/tbl/supprt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0316	Bed safety enclosure	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E0325	Urinal male jug-type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0326	Urinal female jug-type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0350	Control unit bowel system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
E0352	Disposable pack w/bowel syst	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0370	Air elevator for heel	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0371	Nonpower mattress overlay	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0372	Powered air mattress overlay	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0373	Nonpowered pressure mattress	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0424	Stationary compressed gas 02	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0425	Gas system stationary compre	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0430	Oxygen system gas portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0431	Portable gaseous 02	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0434	Portable liquid 02	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0435	Oxygen system liquid portabl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0439	Stationary liquid 02	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0440	Oxygen system liquid station	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0441	Oxygen contents, gaseous	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0442	Oxygen contents, liquid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0443	Portable 02 contents, gas	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0444	Portable 02 contents, liquid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0445	Oximeter non-invasive	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0450	Volume vent stationary/porta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0454	Pressure ventilator	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0455	Oxygen tent excl croup/ped t	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0457	Chest shell	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0459	Chest wrap	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0460	Neg press vent portabl/statn	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0461	Vol vent noninvasive interfa	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0462	Rocking bed w/ or w/o side r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0480	Percussor elect/pneum home m	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0481	Intrpulmnry percuss vent sys	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0482	Cough stimulating device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0483	Chest compression gen system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0484	Non-elec oscillatory pep dvc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0500	Ippb all types	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0550	Humidif extens suppl w ippb	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0555	Humidifier for use w/ regula	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0560	Humidifier supplemental w/ i	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0565	Compressor air power source	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0570	Nebulizer with compression	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0571	Aerosol compressor for svneb	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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E0572	Aerosol compressor adjust pr	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0574	Ultrasonic generator w svneb	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0575	Nebulizer ultrasonic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0580	Nebulizer for use w/ regulat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0585	Nebulizer w/ compressor & he	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0590	Dispensing fee dme neb drug	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0600	Suction pump portab hom modl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0601	Cont airway pressure device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0602	Manual breast pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0603	Electric breast pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0604	Hosp grade elec breast pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0605	Vaporizer room type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0606	Drainage board postural	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0607	Blood glucose monitor home	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0610	Pacemaker monitr audible/vis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0615	Pacemaker monitr digital/vis	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0616	Cardiac event recorder	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0617	Automatic ext defibrillator	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0618	Apnea monitor	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0619	Apnea monitor w recorder	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0620	Cap bld skin piercing laser	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0621	Patient lift sling or seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0625	Patient lift bathroom or toi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0627	Seat lift incorp lift-chair	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0628	Seat lift for pt furn-electr	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0629	Seat lift for pt furn-non-el	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0630	Patient lift hydraulic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0635	Patient lift electric	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0636	PT support & positioning sys	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0650	Pneuma compresor non-segment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0651	Pneum compressor segmental	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0652	Pneum compres w/cal pressure	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0655	Pneumatic appliance half arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0660	Pneumatic appliance full leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0665	Pneumatic appliance full arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0666	Pneumatic appliance half leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0667	Seg pneumatic appl full leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0668	Seg pneumatic appl full arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
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E0669	Seg pneumatic appli half leg	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0671	Pressure pneum appl full leg	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0672	Pressure pneum appl full arm	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0673	Pressure pneum appl half leg	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0691	Uvl pnl 2 sq ft or less	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0692	Uvl sys panel 4 ft	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0693	Uvl sys panel 6 ft	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0694	Uvl md cabinet sys 6 ft	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0700	Safety equipment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0701	Helmet w face guard prefab	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0710	Restraints any type	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0720	Tens two lead	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0730	Tens four lead	Contracted	Contracted	0	0%	0%	0%	0	0	0	0	0	0		C	
E0731	Conductive garment for tens/	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0740	Incontinence treatment systm	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0744	Neuromuscular stim for scoli	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0745	Neuromuscular stim for shock	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0746	Electromyograph biofeedback	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0747	Elec osteogen stim not spine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0748	Elec osteogen stim spinal	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0749	Elec osteogen stim implanted	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0752	Neurostimulator electrode	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0754	Pulsegenerator pt programmer	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0755	Electronic salivary reflex s	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0756	Implantable pulse generator	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0757	Implantable RF receiver	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0758	External RF transmitter	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0759	Replace rdfrquncy transmitt	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0760	Osteogen ultrasound stimltor	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0761	Nontherm electromgntc device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0765	Nerve stimulator for tx n&v	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0776	Iv pole	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0779	Amb infusion pump mechanical	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0780	Mech amb infusion pump <8hrs	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0781	External ambulatory infus pu	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0782	Non-programble infusion pump	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0783	Programmable infusion pump	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0784	Ext amb infusn pump insulin	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
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E0785	Replacement impl pump cathet	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0786	Implantable pump replacement	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0		X	
E0791	Parenteral infusion pump sta	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0830	Ambulatory traction device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0840	Tract frame attach headboard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0850	Traction stand free standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0855	Cervical traction equipment	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E0860	Tract equip cervical tract	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0870	Tract frame attach footboard	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0880	Trac stand free stand extrem	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0890	Traction frame attach pelvic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0900	Trac stand free stand pelvic	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0910	Trapeze bar attached to bed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0920	Fracture frame attached to b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0930	Fracture frame free standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0935	Exercise device passive moti	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0940	Trapeze bar free standing	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0941	Gravity assisted traction de	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0942	Cervical head harness/halter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0943	Cervical pillow	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
E0944	Pelvic belt/harness/boot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0945	Belt/harness extremity	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0946	Fracture frame dual w cross	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0947	Fracture frame attachmnts pe	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0948	Fracture frame attachmnts ce	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0950	Tray	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0951	Loop heel	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0952	Loop tie	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0953	Pneumatic tire	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0954	Wheelchair semi-pneumatic ca	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0958	Whlchr att- conv 1 arm drive	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0959	Amputee adapter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0961	Wheelchair brake extension	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0962	Wheelchair 1 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0963	Wheelchair 2 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0964	Wheelchair 3 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0965	Wheelchair 4 inch cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E0966	Wheelchair head rest extensi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

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Effective August 1, 2003

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		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
E0967	Wheelchair hand rims	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0968	Wheelchair commode seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0969	Wheelchair narrowing device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0970	Wheelchair no. 2 footplates	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0971	Wheelchair anti-tipping devi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0972	Transfer board or device	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0973	Wheelchair adjustabl height	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0974	Wheelchair grade-aid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0975	Wheelchair reinforced seat u	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0976	Wheelchair reinforced back u	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0977	Wheelchair wedge cushion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0978	Wheelchair belt w/airplane b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0979	Wheelchair belt with velcro	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0980	Wheelchair safety vest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0990	Whellchair elevating leg res	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0991	Wheelchair upholstery seat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0992	Wheelchair solid seat insert	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0993	Wheelchair back upholstery	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0994	Wheelchair arm rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0995	Wheelchair calf rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0996	Wheelchair tire solid	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0997	Wheelchair caster w/ a fork	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0998	Wheelchair caster w/o a fork	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E0999	Wheelchr pneumatic tire w/wh	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1000	Wheelchair tire pneumatic ca	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1001	Wheelchair wheel	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1011	Ped wc modify width adjustm	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1012	Int seat sys planar ped w/c	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1013	Int seat sys contour ped w/c	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1014	Reclining back add ped w/c	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1015	Shock absorber for man w/c	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1016	Shock absorber for power w/c	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1017	HD shck absrbr for hd man wc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1018	HD shck absrber for hd powwc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1020	Residual limb support system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1025	Pedwc lat/thor sup nocontour	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1026	Pedwc contoured lat/thor sup	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1027	Ped wc lat/ant support	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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E1031	Rollabout chair with casters	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1035	Patient transfer system	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1037	Transport chair, ped size	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1038	Transport chair, adult size	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1050	Wheelchr fxd full length arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1060	Wheelchair detachable arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1065	Wheelchair power attachment	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1066	Wheelchair battery charger	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1069	Wheelchair deep cycle batter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1070	Wheelchair detachable foot r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1083	Hemi-wheelchair fixed arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1084	Hemi-wheelchair detachable a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1085	Hemi-wheelchair fixed arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1086	Hemi-wheelchair detachable a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1087	Wheelchair lightwt fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1088	Wheelchair lightweight det a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1089	Wheelchair lightwt fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1090	Wheelchair lightweight det a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1092	Wheelchair wide w/ leg rests	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1093	Wheelchair wide w/ foot rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1100	Whchr s-recl fxd arm leg res	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1110	Wheelchair semi-recl detach	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1130	Whlchr stand fxd arm ft rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1140	Wheelchair standard detach a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1150	Wheelchair standard w/ leg r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1160	Wheelchair fixed arms	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1161	Manual adult wc w tiltinspac	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1170	Whlchr ampu fxd arm leg rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1171	Wheelchair amputee w/o leg r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1172	Wheelchair amputee detach ar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1180	Wheelchair amputee w/ foot r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1190	Wheelchair amputee w/ leg re	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1195	Wheelchair amputee heavy dut	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1200	Wheelchair amputee fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1210	Whlchr moto ful arm leg rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1211	Wheelchair motorized w/ det	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1212	Wheelchair motorized w full	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1213	Wheelchair motorized w/ det	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

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E1220	Whlchr special size/constrc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1221	Wheelchair spec size w foot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1222	Wheelchair spec size w/ leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1223	Wheelchair spec size w foot	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1224	Wheelchair spec size w/ leg	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1225	Wheelchair spec sz semi-recl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1226	Wheelchair spec sz full-recl	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1227	Wheelchair spec sz spec ht a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1228	Wheelchair spec sz spec ht b	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1230	Power operated vehicle	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1231	Rigid ped w/c tilt-in-space	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1232	Folding ped wc tilt-in-space	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1233	Rig ped wc tltnspc w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1234	Fld ped wc tltnspc w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1235	Rigid ped wc adjustable	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1236	Folding ped wc adjustable	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1237	Rgd ped wc adjstabl w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1238	Fld ped wc adjstabl w/o seat	Not Covered	Not Covered	0	0%	0%	0%	9	0	0	0	0	0	X		
E1240	Whchr litwt det arm leg rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1250	Wheelchair lightwt fixed arm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1260	Wheelchair lightwt foot rest	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1270	Wheelchair lightweight leg r	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1280	Whchr h-duty det arm leg res	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1285	Wheelchair heavy duty fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1290	Wheelchair hvy duty detach a	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1295	Wheelchair heavy duty fixed	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1296	Wheelchair special seat heig	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1297	Wheelchair special seat dept	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1298	Wheelchair spec seat depth/w	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1300	Whirlpool portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1310	Whirlpool non-portable	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1340	Repair for DME, per 15 min	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1353	Oxygen supplies regulator	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1355	Oxygen supplies stand/rack	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1372	Oxy suppl heater for nebuliz	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1390	Oxygen concentrator	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0	N		
E1399	Durable medical equipment mi	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		
E1405	O2/water vapor enrich w/heat	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0	N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

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E1406	O2/water vapor enrich w/o he	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1500	Centrifuge	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1510	Kidney dialysate delivry sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1520	Heparin infusion pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1530	Replacement air bubble detec	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1540	Replacement pressure alarm	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1550	Bath conductivity meter	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1560	Replace blood leak detector	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1570	Adjustable chair for esrd pt	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1575	Transducer protect/fld bar	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1580	Unipuncture control system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1590	Hemodialysis machine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1592	Auto interm peritoneal dialy	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1594	Cycler dialysis machine	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1600	Deli/install chrg hemo equip	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1610	Reverse osmosis h2o puri sys	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1615	Deionizer H2O puri system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1620	Replacement blood pump	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1625	Water softening system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1630	Reciprocating peritoneal dia	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1632	Wearable artificial kidney	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1635	Compact travel hemodialyzer	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1636	Sorbent cartridges per 10	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1637	Hemostats for dialysis, each	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1639	Dialysis scale	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1699	Dialysis equipment noc	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1700	Jaw motion rehab system	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1701	Repl cushions for jaw motion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1702	Repl measr scales jaw motion	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N	
E1800	Adjust elbow ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1801	SPS elbow device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1802	Adjust forearm pro/sup device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1805	Adjust wrist ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1806	SPS wrist device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1810	Adjust knee ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1811	SPS knee device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1815	Adjust ankle ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1816	SPS ankle device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	

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E1818	SPS forearm device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1820	Soft interface material	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1821	Replacement interface SPSD	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1825	Adjust finger ext/flex devc	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1830	Adjust toe ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1840	Adj shoulder ext/flex device	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E1902	AAC non-electronic board	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E2000	Gastric suction pump hme mdl	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E2100	Bld glucose monitor w voice	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
E2101	Bld glucose monitor w lance	By Report	By Report	0	0%	0%	0%	9	0	0	0	0	0		N	
G0001	Drawing blood for specimen	\$4.20	\$4.20	0	0%	0%	0%	9	9	9	9	9	9		L	
G0008	Admin influenza virus vac	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
G0009	Admin pneumococcal vaccine	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
G0010	Admin hepatitis b vaccine	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B	
G0030	PET imaging prev PET single	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0030-26	PET imaging prev PET single	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0030-TC	PET imaging prev PET single	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0031	PET imaging prev PET multiple	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0031-26	PET imaging prev PET multiple	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0031-TC	PET imaging prev PET multiple	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0032	PET follow SPECT 78464 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0032-26	PET follow SPECT 78464 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0032-TC	PET follow SPECT 78464 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0033	PET follow SPECT 78464 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0033-26	PET follow SPECT 78464 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0033-TC	PET follow SPECT 78464 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0034	PET follow SPECT 76865 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0034-26	PET follow SPECT 76865 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0034-TC	PET follow SPECT 76865 singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0035	PET follow SPECT 78465 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0035-26	PET follow SPECT 78465 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0035-TC	PET follow SPECT 78465 mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0036	PET follow cornry angio sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0036-26	PET follow cornry angio sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0036-TC	PET follow cornry angio sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0037	PET follow cornry angio mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0037-26	PET follow cornry angio mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0037-TC	PET follow cornry angio mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
G0038	PET follow myocard perf sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0038-26	PET follow myocard perf sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0038-TC	PET follow myocard perf sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0039	PET follow myocard perf mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0039-26	PET follow myocard perf mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0039-TC	PET follow myocard perf mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0040	PET follow stress echo singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0040-26	PET follow stress echo singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0040-TC	PET follow stress echo singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0041	PET follow stress echo mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0041-26	PET follow stress echo mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0041-TC	PET follow stress echo mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0042	PET follow ventriculogm sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0042-26	PET follow ventriculogm sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0042-TC	PET follow ventriculogm sing	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0043	PET follow ventriculogm mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0043-26	PET follow ventriculogm mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0043-TC	PET follow ventriculogm mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0044	PET following rest ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0044-26	PET following rest ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0044-TC	PET following rest ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0045	PET following rest ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0045-26	PET following rest ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0045-TC	PET following rest ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0046	PET follow stress ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0046-26	PET follow stress ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0046-TC	PET follow stress ECG singl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0047	PET follow stress ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0047-26	PET follow stress ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0047-TC	PET follow stress ECG mult	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0101	CA screen;pelvic/breast exam	\$49.06	\$31.36	0	0%	0%	0%	0	0	0	0	0	0		R	
G0102	Prostate ca screening; dre	Bundled	Bundled	0	0%	0%	0%	0	9	9	9	9	9		B	
G0103	Psa, total screening	\$35.98	\$35.98	0	0%	0%	0%	9	9	9	9	9	9		L	
G0104	CA screen;flexi sigmoidscope	\$143.14	\$76.38	0	0%	0%	0%	0	2	0	1	0	0		R	
G0105	Colorectal scrn; hi risk ind	\$603.93	\$281.22	0	0%	0%	0%	0	2	0	1	0	0		R	
G0106	Colon CA screen;barium enema	\$186.64	\$186.64	0	0%	0%	0%	1	0	0	0	0	0		R	
G0106-26	Colon CA screen;barium enema	\$68.28	\$68.28	0	0%	0%	0%	1	0	0	0	0	0		R	
G0106-TC	Colon CA screen;barium enema	\$117.85	\$117.85	0	0%	0%	0%	1	0	0	0	0	0		R	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING		PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)		
G0107	CA screen; fecal blood test	\$6.36	\$6.36	0	0%	0%	0%	9	9	9	9	9	9		L
G0108	Diab manage trn per indiv	\$42.49	\$42.49	0	0%	0%	0%	0	0	0	0	0	0		R
G0109	Diab manage trn ind/group	\$24.78	\$24.78	0	0%	0%	0%	0	0	0	0	0	0		R
G0110	Nett pulm-rehab educ; ind	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0111	Nett pulm-rehab educ; group	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0112	Nett;nutrition guid, initial	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0113	Nett;nutrition guid,subseqnt	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0114	Nett; psychosocial consult	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0115	Nett; psychological testing	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0116	Nett; psychosocial counsel	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0117	Glaucoma scrn hgh risk direc	Bundled	Bundled	0	0%	0%	0%	0	0	0	0	0	0		B
G0118	Glaucoma scrn hgh risk direc	Bundled	Bundled	0	0%	0%	0%	0	0	0	0	0	0		B
G0120	Colon ca scrn; barium enema	\$186.64	\$186.64	0	0%	0%	0%	1	0	0	0	0	0		R
G0120-26	Colon ca scrn; barium enema	\$68.28	\$68.28	0	0%	0%	0%	1	0	0	0	0	0		R
G0120-TC	Colon ca scrn; barium enema	\$117.85	\$117.85	0	0%	0%	0%	1	0	0	0	0	0		R
G0121	Colon ca scrn not hi rsk ind	\$603.93	\$281.22	0	0%	0%	0%	0	2	0	1	0	0		R
G0122	Colon ca scrn; barium enema	\$189.17	\$189.17	0	0%	0%	0%	1	9	9	9	9	9		R
G0122-26	Colon ca scrn; barium enema	\$70.81	\$70.81	0	0%	0%	0%	1	9	9	9	9	9		R
G0122-TC	Colon ca scrn; barium enema	\$117.85	\$117.85	0	0%	0%	0%	1	9	9	9	9	9		R
G0123	Screen cerv/vag thin layer	\$39.63	\$39.63	0	0%	0%	0%	9	9	9	9	9	9		L
G0124	Screen c/v thin layer by MD	\$31.36	\$31.36	0	0%	0%	0%	0	0	0	0	0	0		R
G0125	PET image pulmonary nodule	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X
G0125-26	PET image pulmonary nodule	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X
G0125-TC	PET image pulmonary nodule	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X
G0127	Trim nail(s)	\$22.26	\$12.65	0	0%	0%	0%	0	2	0	1	0	0		R
G0128	CORF skilled nursing service	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X
G0129	Part. Hosp. Prog. Occupa Tx.	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
G0130	Single energy x-ray study	\$59.18	\$59.18	0	0%	0%	0%	1	0	0	0	0	0		R
G0130-26	Single energy x-ray study	\$17.20	\$17.20	0	0%	0%	0%	1	0	0	0	0	0		R
G0130-TC	Single energy x-ray study	\$41.98	\$41.98	0	0%	0%	0%	1	0	0	0	0	0		R
G0141	Scr c/v cyto,autosys and md	\$31.36	\$31.36	0	0%	0%	0%	0	0	0	0	0	0		R
G0143	Scr c/v cyto,thinlayer,rescr	\$39.63	\$39.63	0	0%	0%	0%	9	9	9	9	9	9		L
G0144	Scr c/v cyto,thinlayer,rescr	\$41.79	\$41.79	0	0%	0%	0%	9	9	9	9	9	9		L
G0145	Scr c/v cyto,thinlayer,rescr	\$51.81	\$51.81	0	0%	0%	0%	9	9	9	9	9	9		L
G0147	Scr c/v cyto, automated sys	\$22.26	\$22.26	0	0%	0%	0%	9	9	9	9	9	9		L
G0148	Scr c/v cyto, autosys, rescr	\$29.72	\$29.72	0	0%	0%	0%	9	9	9	9	9	9		L
G0151	HHCP-serv of pt,ea 15 min	\$32.77	\$32.77	0	0%	0%	0%	0	0	0	0	0	0		F
G0152	HHCP-serv of ot,ea 15 min	\$33.96	\$33.96	0	0%	0%	0%	0	0	0	0	0	0		F

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING		PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
G0153	HHCP-svs of s/l path,ea 15mn	\$33.96	\$33.96	0	0%	0%	0%	0	0	0	0	0	0	F		
G0154	HHCP-svs of rn,ea 15 min	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0155	HHCP-svs of csw,ea 15 min	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0156	HHCP-svs of aide,ea 15 min	\$5.71	\$5.71	0	0%	0%	0%	0	0	0	0	0	0	F		
G0166	Extrnl counterpulse, per tx	\$288.81	\$5.56	0	0%	0%	0%	0	9	9	9	9	9	R		
G0167	Hyperbaric oz tx;no md reqrd	\$37.94	\$37.94	0	0%	0%	0%	5	9	9	9	9	9	R		
G0168	Wound closure by adhesive	\$137.58	\$31.87	0	0%	0%	0%	0	2	0	1	0	0	R		
G0173	Stereo radoisurgery,complete	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G0175	OPPS Service,sched team conf	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9	O		
G0176	OPPS/PHP;activity therapy	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G0177	OPPS/PHP; train & educ serv	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9	O		
G0179	MD recertification HHA PT	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0180	MD certification HHA patient	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0181	Home health care supervision	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0182	Hospice care supervision	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0186	Dstry eye lesn,fdr vssl tech	By Report	By Report	90	0%	0%	0%	0	2	1	0	1	1	N		
G0202	Screeningmammographydigital	\$181.58	\$181.58	0	0%	0%	0%	1	0	2	0	0	0	R		
G0202-26	Screeningmammographydigital	\$50.07	\$50.07	0	0%	0%	0%	1	0	2	0	0	0	R		
G0202-TC	Screeningmammographydigital	\$132.01	\$132.01	0	0%	0%	0%	1	0	2	0	0	0	R		
G0204	Diagnosticmammographydigital	\$192.71	\$192.71	0	0%	0%	0%	1	0	2	0	0	0	R		
G0204-26	Diagnosticmammographydigital	\$62.72	\$62.72	0	0%	0%	0%	1	0	2	0	0	0	R		
G0204-TC	Diagnosticmammographydigital	\$129.99	\$129.99	0	0%	0%	0%	1	0	2	0	0	0	R		
G0206	Diagnosticmammographydigital	\$155.28	\$155.28	0	0%	0%	0%	1	0	0	0	0	0	R		
G0206-26	Diagnosticmammographydigital	\$50.58	\$50.58	0	0%	0%	0%	1	0	0	0	0	0	R		
G0206-TC	Diagnosticmammographydigital	\$104.70	\$104.70	0	0%	0%	0%	1	0	0	0	0	0	R		
G0210	PET img wholebody dxlung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0210-26	PET img wholebody dxlung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0210-TC	PET img wholebody dxlung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0211	PET img wholbody init lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0211-26	PET img wholbody init lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0211-TC	PET img wholbody init lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0212	PET img wholebod restag lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0212-26	PET img wholebod restag lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0212-TC	PET img wholebod restag lung	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0213	PET img wholbody dx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0213-26	PET img wholbody dx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0213-TC	PET img wholbody dx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		
G0214	PET img wholebod init	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0	X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
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		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
G0214-26	PET img wholebod init	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0214-TC	PET img wholebod init	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0215	PETimg wholebod restag	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0215-26	PETimg wholebod restag	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0215-TC	PETimg wholebod restag	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0216	PET img wholebod dx melanoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0216-26	PET img wholebod dx melanoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0216-TC	PET img wholebod dx melanoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0217	PET img wholebod init melan	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0217-26	PET img wholebod init melan	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0217-TC	PET img wholebod init melan	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0218	PET img wholebod restag mela	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0218-26	PET img wholebod restag mela	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0218-TC	PET img wholebod restag mela	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0219	PET img wholbod melano nonco	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X		
G0219-26	PET img wholbod melano nonco	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X		
G0219-TC	PET img wholbod melano nonco	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X		
G0220	PET img wholebod dx lymphoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0220-26	PET img wholebod dx lymphoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0220-TC	PET img wholebod dx lymphoma	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0221	PET imag wholbod init lympho	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0221-26	PET imag wholbod init lympho	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0221-TC	PET imag wholbod init lympho	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0222	PET imag wholbod resta lymph	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0222-26	PET imag wholbod resta lymph	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0222-TC	PET imag wholbod resta lymph	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0223	PET imag wholbod reg dx head	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0223-26	PET imag wholbod reg dx head	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0223-TC	PET imag wholbod reg dx head	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0224	PET imag wholbod reg ini hea	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0224-26	PET imag wholbod reg ini hea	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0224-TC	PET imag wholbod reg ini hea	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0225	PET whol restag headneckonly	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0225-26	PET whol restag headneckonly	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0225-TC	PET whol restag headneckonly	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0226	PET img wholbody dx esophagl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0226-26	PET img wholbody dx esophagl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0226-TC	PET img wholbody dx esophagl	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING			PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
G0227	PET img wholbod ini esophage	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0227-26	PET img wholbod ini esophage	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0227-TC	PET img wholbod ini esophage	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0228	PET img wholbod restg esopha	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0228-26	PET img wholbod restg esopha	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0228-TC	PET img wholbod restg esopha	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0229	PET img metaboloc brain pres	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0229-26	PET img metaboloc brain pres	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0229-TC	PET img metaboloc brain pres	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0230	PET myocard viability post	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0230-26	PET myocard viability post	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0230-TC	PET myocard viability post	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0231	PET WhBD colorec; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0231-26	PET WhBD colorec; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0231-TC	PET WhBD colorec; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0232	PET whbd lymphoma; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0232-26	PET whbd lymphoma; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0232-TC	PET whbd lymphoma; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0233	PET whbd melanoma; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0233-26	PET whbd melanoma; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0233-TC	PET whbd melanoma; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0234	PET WhBD pulm nod; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0234-26	PET WhBD pulm nod; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0234-TC	PET WhBD pulm nod; gamma cam	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
G0236	Digital film convert diag ma	\$26.30	\$26.30	0	0%	0%	0%	1	0	0	0	0	0		R		
G0236-26	Digital film convert diag ma	\$4.55	\$4.55	0	0%	0%	0%	1	0	0	0	0	0		R		
G0236-TC	Digital film convert diag ma	\$21.75	\$21.75	0	0%	0%	0%	1	0	0	0	0	0		R		
G0237	Therapeutic procd strg endur	\$24.78	\$24.78	0	0%	0%	0%	0	0	0	0	0	0		R		
G0238	Oth resp proc, indiv	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
G0239	Oth resp proc, group	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
G0242	Multisource photon ster plan	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0243	Multisour photon stero treat	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0244	Observ care by facility topt	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O		
G0245	Initial foot exam pt lops	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0246	Followup eval of foot pt lop	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0247	Routine footcare pt w lops	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0248	Demonstrate use home inr mon	\$220.53	\$220.53	0	0%	0%	0%	3	0	0	0	0	0		R		
G0249	Provide test material,equipm	\$171.47	\$171.47	0	0%	0%	0%	3	0	0	0	0	0		R		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
G0250	MD review interpret of test	\$13.15	\$13.15	0	0%	0%	0%	2	0	0	0	0	0		R	
G0251	Linear acc based stero radio	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0252	PET imaging initial dx	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0252-26	PET imaging initial dx	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0252-TC	PET imaging initial dx	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0253	PET image brst dection recur	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0253-26	PET image brst dection recur	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0253-TC	PET image brst dection recur	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0254	PET image brst eval to tx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0254-26	PET image brst eval to tx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0254-TC	PET image brst eval to tx	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0255	Current percep threshold tst	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0255-26	Current percep threshold tst	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0255-TC	Current percep threshold tst	Not Covered	Not Covered	0	0%	0%	0%	1	9	9	9	9	9		X	
G0256	Prostate brachy w palladium	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0257	Unsched dialysis ESRD pt hos	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0259	Inject for sacroiliac joint	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0260	Inj for sacroiliac jt anesth	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0261	Prostate brachy w iodine see	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0262	Sm intestinal image capsule	\$1,064.20	\$1,064.20	0	0%	0%	0%	1	0	0	0	0	0		R	
G0262-26	Sm intestinal image capsule	\$149.21	\$149.21	0	0%	0%	0%	1	0	0	0	0	0		R	
G0262-TC	Sm intestinal image capsule	\$914.49	\$914.49	0	0%	0%	0%	1	0	0	0	0	0		R	
G0263	Adm with CHF, CP, asthma	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0264	Assmt otr CHF, CP, asthma	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0265	Cryopresevation Freeze+stora	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0266	Thawing + expansion froz cel	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0267	Bone marrow or psc harvest	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
G0268	Removal of impacted wax md	Not Covered	Not Covered	0	0%	0%	0%	0	2	2	1	0	0		X	
G0269	Occlusive device in vein art	Hosp. Only	Hosp. Only	0	0%	0%	0%	9	9	9	9	9	9		O	
G0270	MNT subs tx for change dx	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0271	Group MNT 2 or more 30 mins	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X	
G0272	Naso/oro gastric tube pl MD	\$23.27	\$23.27	0	0%	0%	0%	0	0	0	1	0	0		R	
G0273	Pretx planning, non-Hodgkins	Not Covered	Not Covered	0	0%	0%	0%	1	2	0	0	0	0		X	
G0273-26	Pretx planning, non-Hodgkins	Not Covered	Not Covered	0	0%	0%	0%	1	2	0	0	0	0		X	
G0273-TC	Pretx planning, non-Hodgkins	Not Covered	Not Covered	0	0%	0%	0%	1	2	0	0	0	0		X	
G0274	Radiopharm tx, non-Hodgkins	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0274-26	Radiopharm tx, non-Hodgkins	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	
G0274-TC	Radiopharm tx, non-Hodgkins	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
G0275	Renal angio, cardiac cath	\$18.21	\$18.21	0	0%	0%	0%	0	0	0	0	0	0	R		
G0278	Iliac art angio,cardiac cath	\$18.21	\$18.21	0	0%	0%	0%	0	0	0	0	0	0	R		
G0279	Excorp shock tx, elbow epi	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0280	Excorp shock tx other than	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0281	Elec stim unattend for press	\$17.70	\$17.70	0	0%	0%	0%	0	0	0	0	0	0	R		
G0282	Elect stim wound care not pd	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G0283	Elec stim other than wound	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X		
G0288	Recon, CTA for surg plan	\$546.26	\$546.26	0	0%	0%	0%	3	0	0	0	0	0	R		
G0289	Arthro, loose body + chondro	\$114.31	\$114.31	0	0%	0%	0%	0	0	1	0	0	0	R		
G0290	Drug-eluting stents, single	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G0291	Drug-eluting stents,each add	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G0292	Adm exp drugs,clinical trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G0293	Non-cov surg proc,clin trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G0294	Non-cov proc, clinical trial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G0295	Electromagnetic therapy onc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G9001	MCCD, initial rate	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9002	MCCD,maintenance rate	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G9003	MCCD, risk adj hi, initial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G9004	MCCD, risk adj lo, initial	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
G9005	MCCD, risk adj, maintenance	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9006	MCCD, Home monitoring	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9007	MCCD, sch team conf	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9008	Mccd,phys coor-care ovrsght	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9009	MCCD, risk adj, level 3	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9010	MCCD, risk adj, level 4	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9011	MCCD, risk adj, level 5	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9012	Other Specified Case Mgmt	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
G9016	Demo-smoking cessation coun	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X		
H0001	Alcohol and/or drug assess	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0002	Alcohol and/or drug screenin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0003	Alcohol and/or drug screenin	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0004	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0005	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0006	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0007	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0008	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0009	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		
H0010	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
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		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
H0011	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0012	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0013	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0014	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0015	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0016	Alcohol and/or drug services	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0017	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0018	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0019	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0020	Alcohol and/or drug services	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0021	Alcohol and/or drug training	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0022	Alcohol and/or drug interven	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0023	Alcohol and/or drug outreach	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0024	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0025	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0026	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0027	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0028	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0029	Alcohol and/or drug preventi	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0030	Alcohol and/or drug hotline	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0031	MH health assess by non-md	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0032	MH svc plan dev by non-md	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0033	Oral med adm direct observe	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0034	Med trng & support per 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0035	MH partial hosp tx under 24h	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0036	Comm psy face-face per 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0037	Comm psy sup tx pgm per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0038	Self-help/peer svc per 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0039	Asser com tx face-face/15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0040	Assert comm tx pgm per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0041	Fos c chld non-ther per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0042	Fos c chld non-ther per mon	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0043	Supported housing, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0044	Supported housing, per month	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0045	Respite not-in-home per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0046	Mental health service, nos	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H0047	Alcohol/drug abuse svc nos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H0048	Spec coll non-blood:a/d test	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
H1000	Prenatal care atrisk assessm	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H1001	Antepartum management	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H1002	Carecoordination prenatal	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H1003	Prenatal at risk education	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H1004	Follow up home visit/prental	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H1005	Prenatalcare enhanced srv pk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	
H1010	Nonmed family planning ed	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H1011	Family assessment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2000	Comp multidisipln evaluation	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2001	Rehabilitation program 1/2 d	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2010	Comprehensive med svc 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2011	Crisis interven svc, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2012	Behav Hlth Day Treat, per hr	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2013	Psych hlth fac svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2014	Skills Train and Dev, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2015	Comp Comm Supp Svc, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2016	Comp Comm Supp Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2017	PsySoc Rehab Svc, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2018	PsySoc Rehab Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2019	Ther Behav Svc, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2020	Ther Behav Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2021	Com Wrap-Around Sv, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2022	Com Wrap-Around Sv, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2023	Supported Employ, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2024	Supported Employ, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2025	Supp Maint Employ, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2026	Supp Maint Employ, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2027	Psychoed Svc, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2028	Sex Offend Tx Svc, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2029	Sex Offend Tx Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2030	MH Clubhouse Svc, per 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2031	MH Clubhouse Svc, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2032	Activity Therapy, per 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2033	Multisys Ther/Juvenile 15min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2034	A/D Halfway House, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2035	A/D Tx Program, per hour	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2036	A/D Tx Program, per diem	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
H2037	Dev Delay Prev Dp Ch, 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
Effective August 1, 2003

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		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)			
J0120	Tetracyclin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0130	Abciximab injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0150	Injection adenosine 6 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0151	Adenosine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0170	Adrenalin epinephrin inject	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0190	Inj biperiden lactate/5 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J0200	Alatrofloxacin mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0205	Alglucerase injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0207	Amifostine	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0210	Methyldopate hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0256	Alpha 1 proteinase inhibitor	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0270	Alprostadil for injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0275	Alprostadil urethral suppos	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0280	Aminophyllin 250 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0282	Amiodarone HCl	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0285	Amphotericin B	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0287	Amphotericin b lipid complex	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0288	Ampho b cholesteryl sulfate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0289	Amphotericin b liposome inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0290	Ampicillin 500 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0295	Ampicillin sodium per 1.5 gm	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0300	Amobarbital 125 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0330	Succinylcholine chloride inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0350	Injection anistreplase 30 u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0360	Hydralazine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0380	Inj metaraminol bitartrate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0390	Chloroquine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0395	Arbutamine HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0456	Azithromycin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0460	Atropine sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0470	Dimecaprol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0475	Baclofen 10 MG injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0476	Baclofen intrathecal trial	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0500	Dicyclomine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0515	Inj benztropine mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0520	Bethanechol chloride inject	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0530	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0540	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HPCPS
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CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING	PRE OP (-56)		INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)				
J0550	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0560	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0570	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0580	Penicillin g benzathine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0585	Botulinum toxin a per unit	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0587	Botulinum toxin type B	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0592	Buprenorphine hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0600	Edetate calcium disodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0610	Calcium gluconate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0620	Calcium glycer & lact/10 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0630	Calcitonin salmon injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0636	Inj calcitriol per 0.1 mcg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J0637	Caspofungin acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0640	Leucovorin calcium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0670	Inj mepivacaine HCL/10 ml	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0690	Cefazolin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0692	Cefepime HCl for injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0694	Cefoxitin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0696	Ceftriaxone sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0697	Sterile cefuroxime injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0698	Cefotaxime sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0702	Betamethasone acet&sod phosp	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0704	Betamethasone sod phosp/4 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0706	Caffeine citrate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J0710	Cephapirin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0713	Inj ceftazidime per 500 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0715	Ceftizoxime sodium / 500 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0720	Chloramphenicol sodium injec	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0725	Chorionic gonadotropin/1000u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0735	Clonidine hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0740	Cidofovir injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0743	Cilastatin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0744	Ciprofloxacin iv	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0745	Inj codeine phosphate /30 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0760	Colchicine injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J0770	Colistimethate sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0780	Prochlorperazine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J0800	Corticotropin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		

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J0835	Inj cosyntropin per 0.25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0850	Cytomegalovirus imm IV /vial	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0880	Darbepoetin alfa injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J0895	Deferoxamine mesylate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0900	Testosterone enanthate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0945	Brompheniramine maleate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J0970	Estradiol valerate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J1000	Depo-estradiol cypionate inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J1020	Methylprednisolone 20 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1030	Methylprednisolone 40 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1040	Methylprednisolone 80 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1051	Medroxyprogesterone inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J1055	Medrxyprogester acetate inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J1056	MA/EC contraceptiveinjection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J1060	Testosterone cypionate 1 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1070	Testosterone cypionat 100 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1080	Testosterone cypionat 200 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1094	Inj dexamethasone acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1100	Dexamethasone sodium phos	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1110	Inj dihydroergotamine mesylt	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1120	Acetazolamid sodium injectio	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1160	Digoxin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1165	Phenytoin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1170	Hydromorphone injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1180	Dyphylline injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1190	Dexrazoxane HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1200	Diphenhydramine hcl injectio	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1205	Chlorothiazide sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1212	Dimethyl sulfoxide 50% 50 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1230	Methadone injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1240	Dimenhydrinate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1245	Dipyridamole injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1250	Inj dobutamine HCL/250 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1260	Dolasetron mesylate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1270	Injection, doxercalciferol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X	
J1320	Amitriptyline injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1325	Epoprostenol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	
J1327	Eptifibatide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D	

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING		PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)		
J1330	Ergonovine maleate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1364	Erythro lactobionate /500 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1380	Estradiol valerate 10 MG inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1390	Estradiol valerate 20 MG inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1410	Inj estrogen conjugate 25 MG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1435	Injection estrone per 1 MG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1436	Etidronate disodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1438	Etanercept injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1440	Filgrastim 300 mcg injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1441	Filgrastim 480 mcg injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1450	Fluconazole	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1452	Intraocular Fomivirsen na	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1455	Foscarnet sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1460	Gamma globulin 1 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1470	Gamma globulin 2 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1480	Gamma globulin 3 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1490	Gamma globulin 4 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1500	Gamma globulin 5 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1510	Gamma globulin 6 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1520	Gamma globulin 7 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1530	Gamma globulin 8 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1540	Gamma globulin 9 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1550	Gamma globulin 10 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1560	Gamma globulin > 10 CC inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1563	IV immune globulin	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1564	Immune globulin 10 mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1565	RSV-ivig	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1570	Ganciclovir sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1580	Garamycin gentamicin inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1590	Gatifloxacin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1600	Gold sodium thiomaleate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1610	Glucagon hydrochloride/1 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1620	Gonadorelin hydroch/ 100 mcg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1626	Granisetron HCl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1630	Haloperidol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1631	Haloperidol decanoate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1642	Inj heparin sodium per 10 u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1644	Inj heparin sodium per 1000u	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE		FOL UP	MODIFIERS									ENDO BASE	FSI
		NON-FACILITY SETTING	FACILITY SETTING		PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)		
J1645	Dalteparin sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1650	Inj enoxaparin sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1652	Fondaparinux sodium	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1655	Tinzaparin sodium injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1670	Tetanus immune globulin inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1700	Hydrocortisone acetate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1710	Hydrocortisone sodium ph inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1720	Hydrocortisone sodium succ i	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1730	Diazoxide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1742	Ibutilide fumarate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1745	Infliximab injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1750	Iron dextran	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1756	Iron sucrose injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1785	Injection imiglucerase /unit	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1790	Droperidol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1800	Propranolol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1815	Insulin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1817	Insulin for insulin pump use	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1825	Interferon beta-1a	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1830	Interferon beta-1b / .25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1835	Itraconazole injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1840	Kanamycin sulfate 500 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1850	Kanamycin sulfate 75 MG inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1885	Ketorolac tromethamine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1890	Cephalothin sodium injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X
J1910	Kutapressin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1940	Furosemide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1950	Leuprolide acetate /3.75 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1955	Inj levocarnitine per 1 gm	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1956	Levofloxacin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1960	Levorphanol tartrate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1980	Hyoscyamine sulfate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J1990	Chlordiazepoxide injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J2000	Lidocaine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J2010	Lincomycin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J2020	Linezolid injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J2060	Lorazepam injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D
J2150	Mannitol injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D

Washington State Department of Labor & Industries
Professional Services Fee Schedule

HCPCS
Effective August 1, 2003

CPT® CODE	ABBREVIATED DESCRIPTION	DOLLAR VALUE			FOL UP	MODIFIERS										ENDO BASE	FSI
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J2175	Meperidine hydrochl /100 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2180	Meperidine/promethazine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2210	Methylergonovin maleate inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J2250	Inj midazolam hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2260	Inj milrinone lactate / 5 ML	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2270	Morphine sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2271	Morphine so4 injection 100mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J2275	Morphine sulfate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2300	Inj nalbuphine hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2310	Inj naloxone hydrochloride	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2320	Nandrolone decanoate 50 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2321	Nandrolone decanoate 100 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2322	Nandrolone decanoate 200 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2324	Nesiritide	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J2352	Octreotide acetate injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2355	Oprelvekin injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2360	Orphenadrine injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2370	Phenylephrine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2400	Chloroprocaine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2405	Ondansetron hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2410	Oxymorphone hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2430	Pamidronate disodium /30 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2440	Papaverin hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2460	Oxytetracycline injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2501	Paricalcitol	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J2510	Penicillin g procaine inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2515	Pentobarbital sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2540	Penicillin g potassium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2543	Piperacillin/tazobactam	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2545	Pentamidine isethionte/300mg	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2550	Promethazine hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2560	Phenobarbital sodium inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2590	Oxytocin injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J2597	Inj desmopressin acetate	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2650	Prednisolone acetate inj	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2670	Totazoline hcl injection	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		
J2675	Inj progesterone per 50 MG	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J2680	Fluphenazine decanoate 25 MG	AWP	AWP	0	0%	0%	0%	9	9	9	9	9	9		D		